

MATTHEW 25 NETWORK

PO BOX 33995

WASHINGTON

DC

20033

FEC ID No. C00449801

☐ 24-Hour Notice ☒ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

FEC IDENTIFICATION NUMBER

C C00449801

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Boutwell Studios

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount

447.50

City

Birmingham

State

AL

Zip Code

35209

Purpose of Expenditure

Ad production

Category/
Type

004

Office Sought:

☒ House

State: VA

☐ Senate

District: 05

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.7035

Calendar Year-To-Date Per Election

12750.27

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Catholics United

Date

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount

302.77

City

Washington

State

DC

Zip Code

20017

Purpose of Expenditure

Ad production time

Category/
Type

004

Office Sought:

☒ House

State: VA

☐ Senate

District: 05

☐ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.7036

Calendar Year-To-Date Per Election

302.77

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

750.27

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Christopher Korzen

Signature

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 2 / 2

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)
MATTHEW 25 NETWORK

FEC IDENTIFICATION NUMBER

C C00449801

Check if ☐ 24-hour notice ☒ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Eleison Group

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address

1665 North Fort Meyer; Suite 700

Amount

12000.00

City

Arlington

State

VA

Zip Code

22209

Purpose of Expenditure

Radio ad booking and
air time.Category/
Type

004

Office Sought:

☒ House

State: VA

☐ Senate

District: 05

☐ Presidential

Check One:

☒ Support☐ Oppose

Name of Federal Candidate supported or Opposed by expenditure:

THOMAS STUART PRICE PERRIELLO

Disbursement For:

☐ Primary☒ General 2010☐ Other (specify) : _____

Transaction ID: SE.7033

Calendar Year-To-Date Per Election

12302.77

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures

12000.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

12750.27

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Christopher Korzen

Signature

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0